K 00137)

510(k) SUMMARY OF SAFETY AND EFFECTIVENESS

PREMIER PATHWAY SDN. BHD.

POWDERED LATEX EXAM GLOVES, PROTEIN LABELING (<150Mg/g)

Submitter:

Tucker & Associates

198 Avenue de la D'emerald

Sparks, NV 89434

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(775)342-2613

Contact Person:

Janna P. Tucker, President-CEO, Tucker & Associates

Date Prepared:

April 22, 2000

Trade Name:

(Multiple labels) Powdered Latex Exam Gloves, Protein Labeling

Common Name:

Latex Exam Gloves, Powdered

Classification Name: Latex Exam Gloves, Powdered, Protein Labeling

Summary of Safety and Effectiveness:

Information supporting claims of substantial equivalence, as defined under the Federal Food, Drug and Cosmetic Act, respecting safety and effectiveness is summarized below. For the convenience of the Reviewer, this summary is formatted in accordance with the Agency's final rule "... (510(k) Summaries and 510(k) Statements ..." (21 CFR 807) and can be used to provide a substantial equivalence summary to anyone requesting

it from the preparer.

NEW DEVICE NAME: POWDERED LATEX EXAM GLOVES,

PROTEIN LABELING (<150 Mg/g)

PREDICATE DEVICE NAME: Latex Exam Glove, Powdered

Device Description:

The device is powdered Latex Exam Gloves with Protein Labeling (<150 Mg/g) They are non-sterile, single use, disposable gloves.

Intended Use:

This powdered latex exam glove is intended for medical

purposes that is worn on the examiner's hand or finger to prevent

contamination between patient and examiner.

EXHIBIT K no no la 01/12 Indications Statement: A patient examination glove is a disposable device intended for

medical purposes that is worn on the examiner's hand or finger to

prevent contamination between patient and examiner.

Technological Characteristics This Latex exam glove has the same technological

characteristics as predicate devices. The device is manufactured in

standard sizes.

Performance Data:

The device has met and/or exceeded the requirements of the

following standards and laboratory tests:

ASTM D3578-99

Primary Skin Irritation Study Dermal Sensitization Study

FDA Water Leak, before & after aging at AQL 1.5

Bio-burden Powder Residue

All tests were performed in a certified testing laboratory.

Conclusions:

Based on the 510(k) summaries and 510(k) statements (21 CFR 807) and the information provided herein, we conclude that the device is substantially equivalent to other like devices under the

Federal Food, Drug, and Cosmetic Act.

JANNA P. TUCKER, President-CEO Tucker & Associates Official Correspondent for Premier Pathway SDN. BHD.



Food and Drug Administration 9200 Corporate Boulevard Rockville MD 20850

MAY 2 3 2000

Premier Pathway Sdn. Bhd. C/O Ms. Janna P. Tucker Official Correspondent for Premier Pathway Sdn. Bhd. Tucker and Associates 198 Avenue De La D'emerald Sparks, Nevada 89434-9550

Re: K001327

Trade Name: Powdered Latex Exam Gloves, Protein Labeling

(150 Microgram or Less)

Regulatory Class: I Product Code: LYY Dated: April 24, 2000 Received: April 26, 2000

Dear Ms. Tucker:

We have reviewed your Section 510(k) notification of intent to market the device referenced above and we have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration.

If your device is classified (see above) into either class II (Special Controls) or class III (Premarket Approval), it may be subject to such additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 895. A substantially equivalent determination assumes compliance with the Good Manufacturing Practice for Medical Devices: General (GMP) regulation (21 CFR Part 820) and that, through periodic GMP inspections, the Food and Drug Administration (FDA) will verify such assumptions. Failure to comply with the GMP regulation may result in regulatory action. In addition, FDA may publish further announcements concerning your device in the Federal Register. Please note: this response to your premarket notification submission does not affect any obligation you might have under sections 531 through 542 of

the Act for devices under the Electronic Product Radiation Control provisions, or other Federal laws or regulations.

This letter will allow you to begin marketing your device as described in your 510(k) premarket notification. The FDA finding of substantial equivalence of your device to a legally marketed predicate device results in a classification for your device and thus, permits your device to proceed to the market.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801 and additionally 809.10 for in vitro diagnostic devices), please contact the Office of Compliance at (301) 594-4692. Additionally, for questions on the promotion and advertising of your device, please contact the Office of Compliance at (301) 594-4639. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21 CFR 807.97). Other general information on your responsibilities under the Act may be obtained from the Division of Small Manufacturers Assistance at its toll-free number (800) 638-2041 or (301) 443-6597 or at its Internet address "http://www.fda.gov/cdrh/dsmamain.html".

Sincerely yours

Timothy A. Ulatowski

Director

Division of Dental, Infection Control, and General Hospital Devices Office of Device Evaluation

Center for Devices and Radiological Health

Enclosure

INDICATIONS FOR USE

PREMIER PATHWAY SDN BHD

APPLICANT:

510(k) NUMBER:	<u>K001327</u>	
DEVICE NAME:		ATEX EXAM GLOVES, BELING < 150 Micrograms or
		ntended for medical purposes that is ntamination between patient and
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NLEDEDI		ONTINUE ON ANOTHER PAGE IF
(Divisi Divisi	sion Sign-Off) ion of Dental Infection Contro	evige Evaluation (ODE)
and G	ieneral Hospital Devices Number <u>KOO 132</u>)
Prescription Use (Per 21 CFR 801.109)	OR	Over-The-Counter Use
		(Optional Format 1-2-96)

EVHIBIT F